# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS COASTAL RESOURCES MANAGEMENT COUNCIL

4808 TOWER HILL ROAD; Suite 3, WAKEFIELD, RI 02879 (401) 783-3370

File Number:
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## CRMC PRELIMINARY DETERMINATION REQUEST FORM

PROPERTY INFORMATION:		
Owner(s) of Property:		
Mailing Address of Owner(s):		City/Town
of Property:	Zip Code	Street Location of
Property:		<u> </u>
Plat: Lot(s):	Utility Pole No.(s):	Does site
have access to: Municipal sewer service?:	Public Water Service?:	
Is information available regarding riparian	boundaries, channel lines, etc.	
(Piers, docks, etc. only)		
Waterway:	(Staff Use):	
<b>REQUEST FOR INFORMATION:</b>		
Name of Requestor:		
Mailing Address:		
Phone (9:30 a.m 3:30 p.m.):		
Designer or other contact person(s) includ	le name, address, phone:	
		Activity for which CRMC
staff level feasibility assessment is requeste	ed:	
( ) Residential Development - Sin	gle Family ( ) New Construction	
( ) Addition/Alteration		
( ) Residential Development	Units	
( ) Pier/Dock: Re	esidential: Commercial/Oth	ner:
( ) Shoreline Protection: Type:		
( ) Other, Describe:		
Have you knowledge of any previous perm	nits and/or violations (Local, State, and/or	Federal) on this property? If
so, describe and include pertinent informa	tion:	
Please include a general vicinity location n	nap (street guide sheet, USGS topography	sheet) and a lot map (portion
of Tax Assessor's map), map with topogra		
Signature of Requestor:	Date:	

SEE REVERSE SIDE FOR INSTRUCTIONS

#### **INSTRUCTIONS**

#### \*\* FILING FEE:

### **Preliminary Determination Application Fee Schedule**

- a. Those involving projects of the individual residential homeowner/potential homeowner: **§150.00 Determination request fee**.
- b. All other projects (development of subdivisions, condominiums, commercial, industrial, waterfront business, etc.) **\$1,000.00 Determination Request Fee**.
- c. Jurisdictional determinations: **\$100.00**

**NOTE:** Filing fees are not refundable. Special Note: Determination Request fees may be applied against the filing fee of applications for Council Assent when such application is made within one (1) year of the issuance of the Determination Request report.

- \*\* Four (4) copies of the application, plans and location map must be submitted.
- \*\* A letter from the local tax assessor stating ownership of the property must be submitted.
- \*\* The current **owner must sign this request**, although a potential purchaser may sign if copy of a valid sales agreement is included with the tax assessors' letter.
- \*\* NOTE: This request does not constitute application for permission to perform an activity. A CRMC Preliminary Determination Request is a determination of jurisdiction and which sections of the Rhode Island Coastal Resources Management Program apply to the project under construction.

Mail the above information to:

ATTN: APPLICATIONS COORDINATOR
COASTAL RESOURCES MANAGEMENT COUNCIL
OLIVER STEDMAN GOVERNMENT CENTER
4808 TOWER HILL ROAD; SUITE 3
WAKEFIELD, RI 02879

